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CALIFORNIA LEGISLATURE—2009–10 REGULAR SESSION

## ASSEMBLY BILL

**No. 52**

**Introduced by Assembly Member Portantino**

**(Principal coauthor: Assembly Member Anderson)**

**(Coauthors: Assembly Members Bass, Block, Blumenfield,  
Buchanan, Cook, Huffman, Jones, Ma, Salas, Swanson, and  
Torlakson)**

**(Principal coauthor: Senator Alquist)**

**(Coauthors: Senators DeSaulnier, Leno, ~~Maldonado~~, Padilla, and Price,  
*and Yee*)**

December 2, 2008

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An act to amend Sections 1627, 1628, and 1630 of, and to amend, repeal, and add Sections 102247, 103605, and 103625 of, the Health and Safety Code, relating to umbilical cord blood banking, and declaring the urgency thereof, to take effect immediately.

### LEGISLATIVE COUNSEL'S DIGEST

AB 52, as amended, Portantino. Umbilical Cord Blood Collection Program.

Existing law requires the State Department of Public Health to establish, by January 1, 2010, and until January 1, 2015, the Umbilical Cord Blood Collection Program for the purpose of increasing the amount of umbilical cord blood that is donated in the state and that will be added to the national inventory. Existing law authorizes the department, to the extent private or public funds are identified for this purpose, to contract with blood banks that are licensed or accredited to provide umbilical cord blood banking storage services, for the purpose of collecting and storing umbilical cord blood.

This bill would, instead, to the extent adequate federal funding, as determined by the University of California (UC), is appropriated to UC, request UC to establish and administer the Umbilical Cord Blood Collection Program ~~from January on or before July 1, 2011, until January 1, 2020~~ *to conclude no later than December 31, 2021*, for the purpose of collecting units of umbilical cord blood for public use, as defined, for transplantation and for providing nonclinical units for specified research.

Existing law provides that any funds made available for purposes of the program shall be deposited into the Umbilical Cord Blood Collection Program Fund. Existing law provides that moneys in the fund shall be available, upon appropriation by the Legislature, for purposes of the program. Existing law provides that the fund shall include any federal, state, and private funds made available for purposes of the program.

Existing law requires the collection of a \$7 fee for certified copies of birth certificates.

Under existing law, \$4 of the \$7 fee is allocated to either the county Children's Trust Fund or to the State Children's Trust Fund, which exists in the State Treasury. Existing law requires that the money in the State Children's Trust Fund, upon appropriation by the Legislature, be allocated to the State Department of Social Services for the purpose of funding child abuse and neglect prevention and intervention programs, as specified.

This bill would, instead, until January 1, ~~2020~~ 2022, require the collection of a \$9 fee for certified copies of birth certificates and require that \$2 of any \$9 fee be paid to the Umbilical Cord Blood Collection Program Fund.

The bill would provide that no moneys shall be expended from the fund to implement the program unless and until UC accepts the request to establish and administer the program and the Controller determines, by an unspecified date, that at least an unspecified amount is available

in the fund, and would provide, if this determination is not made, for a prescribed distribution of the money in the fund.

This bill would declare that it is to take effect immediately as an urgency statute.

Vote:  $\frac{2}{3}$ . Appropriation: no. Fiscal committee: yes.

State-mandated local program: no.

*The people of the State of California do enact as follows:*

1 SECTION 1. The Legislature finds and declares all of the  
2 following:

3 (a) Although rich in stem cells known as hematopoietic stem  
4 and progenitor cells (HSPCs), the blood within the umbilical cord  
5 and placenta is mostly discarded as medical waste following the  
6 birth of a child. The relatively small number of units of cord blood  
7 that are stored for transplantation are used to treat blood cancers,  
8 such as leukemia, myeloma, and lymphoma, and more than 70  
9 inherited immunodeficiencies and other genetic and acquired blood  
10 diseases, including sickle cell anemia, thalassemias,  
11 hemoglobinopathies, aplastic anemias,—and marrow failure  
12 disorders, and inherited disorders or errors of metabolism.

13 (b) Conducted after birth, the cord blood donation procedure is  
14 quick, painless, and risk free to the child and mother. The harvested  
15 cord blood is immediately shipped, processed, sorted, labeled,  
16 stored, and frozen. Since the first transplant in 1988, as its use for  
17 transplantation has steadily increased, the unique handling of cord  
18 blood has been the subject of both recent and pending regulation  
19 by the United States Food and Drug Administration (FDA).

20 (c) Although only one-third of all harvested cord blood has  
21 sufficient stem cells to be suitable for transplantation as currently  
22 practiced, the rest may be valuable to university-based and private  
23 research facilities that continue to search for cures for some of our  
24 most common and perplexing medical conditions. The uses for  
25 cord blood are quickly evolving and have created great excitement  
26 among researchers and physicians. For example, cord blood derived  
27 from stem and progenitor cells may also be particularly suitable  
28 candidates for conversion into induced pluripotent stem cells  
29 (IPSCs) derived by modifying only four stem cell-associated genes.  
30 This modification causes the cord blood stem cells to exhibit the  
31 essential characteristics of embryonic stem (ES) cells, the potential

1 to differentiate into all tissues of the body. Since cord blood stem  
2 and progenitor cells per se are very early cells that have great  
3 proliferative capacity, and they already are banked for public use,  
4 tested, and HLA-typed, they could well become the premier source  
5 of optimal cells to convert to iPSCs and might, arguably, provide  
6 an individual a lifetime of personalized replaceable tissue.

7 (d) Cord blood units that are appropriate for transplantation are  
8 used to treat more than 70 lethal diseases, but the current inventory  
9 is not only unable to accommodate the overall demand, but  
10 especially fails to properly provide matched units for many ethnic  
11 and racial groups, including multicultural individuals. According  
12 to the United States Government Accountability Office (GAO)  
13 and the National Marrow Donor Program, over 10,000 children  
14 and adults in the United States would benefit annually from a  
15 transplant from someone unrelated to them, but less than 30 percent  
16 actually receive one largely due to an inadequate inventory.

17 (e) Unlike bone marrow, cord blood can provide good clinical  
18 outcomes with less than a perfect match to the patient. However,  
19 to transplanting physicians, both options are considered valuable.  
20 A bone marrow donation requires an exact match and a live donor  
21 who is willing and available to undergo a time-sensitive medical  
22 procedure. With targeted collections and an adequate inventory,  
23 cord blood can be stored frozen and made immediately available  
24 upon need. This source of stem cells provides all races, ethnicities,  
25 and multiracial individuals with an equal probability of a suitable  
26 match.

27 ~~(f) Private industry has focused on alerting the public about the~~  
28 ~~possibility of banking cord blood for their families. However, the~~

29 ~~(f) The goal of the California Umbilical Cord Blood Collection~~  
30 ~~Program is to develop a public cord blood collection program with~~  
31 ~~the goal of promoting donor diversity so as to increase the chance~~  
32 ~~that a suitable match can be found for all Californians in need of~~  
33 ~~a transplant. is to increase the number of high quality umbilical~~  
34 ~~cord blood units from donors of diverse ethnic groups so that a~~  
35 ~~suitable match can be found for all patients in need of a transplant.~~

36 (g) The federal government established the C.W. Bill Young  
37 Cell Transplantation Program (42 U.S.C. Sec. 274k) in part to  
38 collect and maintain cord blood for public use in transplantation  
39 and research. The goal of the federal program is to collect 150,000  
40 genetically diverse units in an effort to provide patients of all

1 ethnicities an equal probability of receiving a clinical grade,  
2 suitably matched unit of umbilical cord blood. The program,  
3 implemented by the Health Resources and Services Administration  
4 (HRSA) which is part of the United States Department of Health  
5 and Human Services, has specified target collection goals for cord  
6 blood units that will match patient populations that are  
7 underrepresented in the national ~~inventory, including Native~~  
8 ~~American, Latino, African American, Asian, and multiracial~~  
9 ~~individuals.~~ *inventory.*

10 (h) California has been a leader in stem cell research through a  
11 number of previous and ongoing efforts. For example, California  
12 pioneered the first sibling donor cord blood pilot project, and is a  
13 world leader in the more general area of stem cell research and its  
14 medical applications through the establishment and funding of the  
15 California Institute of Regenerative Medicine (CIRM). This makes  
16 California ideally situated to become the leader in harnessing the  
17 therapeutic potential of nonhematopoietic cord blood-derived stem  
18 and progenitor cells.

19 (i) Furthermore, California is home to the most ethnically diverse  
20 population in the world with the highest birth rate in the nation of  
21 550,000 per year. Cord blood donations from California will not  
22 only serve the health needs of Californians, but help build a more  
23 diverse inventory that can provide better matches for patients  
24 throughout the world.

25 (j) In addition to directly ~~savings~~ *saving* lives, an increase in  
26 the inventory of FDA-licensed cord blood stem cell units will save  
27 the state, insurers, donors, and patients significant money now  
28 being spent on lifetime treatments and relieve ongoing pain and  
29 anguish of affected patients and their families.

30 SEC. 2. Section 1627 of the Health and Safety Code is amended  
31 to read:

32 1627. (a) (1) On or before ~~January~~ *July* 1, 2011, the University  
33 of California is requested to develop a plan to establish and  
34 administer the Umbilical Cord Blood Collection Program for the  
35 purpose of collecting units of umbilical cord blood for public use  
36 in transplantation and providing nonclinical units for research  
37 pertaining to biology and new clinical utilization of stem cells  
38 derived from the blood and tissue of the placenta and umbilical  
39 cord. The program shall conclude no later than December 31, ~~2019~~  
40 *2021*.

(2) For purposes of this article, “public use” means both of the following:

(A) The collection of umbilical cord blood units from genetically diverse donors that will be owned by the University of California. This inventory shall be accessible by the National Registry and by qualified California-based and other United States and international registries and transplant centers to increase the likelihood of providing suitably matched donor ~~tissue~~ *cord blood units* to patients who are in need of ~~transplantation~~ *a transplant*.

(B) Cord blood units with a lower number of cells than deemed necessary for clinical transplantation, ~~those available in excessive numbers owing to their overly common types, and those that are otherwise inappropriate for clinical use, as well as placental tissue, shall be provided to assist California-based academic stem cell research laboratories in the investigation of treatments for human disease, under protocols approved by the Committee for the Protection of Human Subjects or an institutional review board, as defined in subdivision (c) of Section 125330.~~ *necessary for clinical transplantation and units that meet clinical requirements, but for other reasons are neither suitable nor likely to be transplanted, may be made available for research.*

(b) (1) In order to implement the collection ~~part~~ *goals* of this program, the University of California may, commensurate with available funds appropriated to the University of California for this program, contract with one or more selected applicant entities that have demonstrated the competence to collect and ship cord blood units in compliance with federal ~~Food and Drug Administration (FDA) and Health Resources and Services Administration (HRSA)~~ guidelines and regulations.

(2) It is the intent of the Legislature that, if the University of California contracts with another entity pursuant to this subdivision, the following shall apply:

(A) The University of California may use a competitive process to identify the best proposals submitted by applicant entities to administer the collection and research objectives of the program, to the extent that the University of California chooses not to undertake these activities itself.

(B) In order to qualify for selection under this section to receive, process, ~~and cryopreserve, or bank~~ cord blood units, the entity shall, at a minimum, have obtained an investigational new drug

1 (IND) exemption from the FDA, a valid accreditation from an  
2 agency recognized by the State Department of Public Health, and  
3 shall be approved by an IRB, or a Biologic License from the FDA,  
4 ~~when available the FDA or a biologic license from the FDA, as~~  
5 *appropriate*, to manufacture clinical grade cord blood stem cell  
6 units for clinical indications.

7 (C) In order to qualify to receive appropriate cord blood units  
8 and placental tissue to advance the research goals of this program,  
9 an entity shall, at a minimum, be a laboratory recognized as having  
10 performed peer-reviewed research on stem and progenitor cells,  
11 including those derived from placental or umbilical cord blood  
12 and postnatal tissue.

13 (3) A medical provider or research facility shall comply with,  
14 and shall be subject to, existing penalties for violations of all  
15 applicable state and federal laws with respect to the protection of  
16 any medical information, as defined in subdivision (g) of Section  
17 56.05 of the Civil Code, and any personally identifiable information  
18 contained in the umbilical cord blood inventory.

19 ~~(c) In implementing the program, the~~ The University of  
20 California is encouraged to make every effort to avoid duplication  
21 or conflicts with existing and ongoing programs and to leverage  
22 existing resources.

23 (d) (1) All information collected pursuant to the program shall  
24 be confidential, and shall be used solely for the purposes of the  
25 program, including research. Access to confidential information  
26 shall be limited to authorized persons who are bound by appropriate  
27 institutional policies or who otherwise agree, in writing, to maintain  
28 the confidentiality of that information.

29 (2) Any person who, in violation of applicable institutional  
30 policies or a written agreement to maintain confidentiality,  
31 discloses any information provided pursuant to this section, or  
32 who uses information provided pursuant to this section in a manner  
33 other than as approved pursuant to this section, may be denied  
34 further access to any confidential information maintained by the  
35 University of California, and shall be subject to a civil penalty not  
36 exceeding one thousand dollars (\$1,000). The penalty provided  
37 for in this section shall not be construed to limit or otherwise  
38 restrict any remedy, provisional or otherwise, provided by law for  
39 the benefit of the University of California or any other person  
40 covered by this section.

(3) Notwithstanding the restrictions of this section, an individual to whom the confidential information pertains shall have access to his or her own personal information.

SEC. 3. Section 1628 of the Health and Safety Code is amended to read:

1628. (a) The University of California may accept public and private funds for the purpose of implementing this article.

(b) Any fees collected pursuant to Section 103625 shall be deposited into the Umbilical Cord Blood Collection Program Fund, which is hereby created in the State Treasury. Moneys in the fund shall be available, upon appropriation by the Legislature, for purposes of this article.

(c) The fund may include additional federal, state, and private funds made available for purposes of the program, including, but not limited to, the fees collected for the fund pursuant to Section 103625, and, notwithstanding Section 16305.7 of the Government Code, any interest earned on moneys in the fund.

(d) Nothing in this section shall preclude the University of California from establishing and administering an additional fund independent of the State Treasury in support of the program or associated clinical research activities.

(e) No moneys shall be expended from the Umbilical Cord Blood Collection Program Fund to implement the program unless and until the University of California accepts the request and develops the plan described in paragraph (1) of subdivision (a) of Section 1627, and the Controller determines, by not later than \_\_\_\_, that at least \_\_\_\_ dollars (\$\_\_\_\_), including both federal and private moneys, is available in the fund.

(f) The Controller shall determine whether there is at least \_\_\_\_ dollars (\$\_\_\_\_) available for implementation of the program. Once the Controller has determined that at least \_\_\_\_ dollars (\$\_\_\_\_) is available to implement the program, he or she shall distribute these funds. If the Controller has not made a determination on or before \_\_\_\_, that at least \_\_\_\_ dollars (\$\_\_\_\_) is available to implement the program, the amount in the fund shall be immediately distributed to each private contributor or the federal government in the amount contributed. The fund shall cease to exist thereafter.

SEC. 4. Section 1630 of the Health and Safety Code is amended to read:



1 1630. (a) This article shall remain in effect only until January  
2 1, ~~2020~~ 2022, and as of that date is repealed, unless a later enacted  
3 statute, that is enacted before January 1, ~~2020~~ 2022, deletes or  
4 extends that date.

5 (b) This article shall be implemented only to the extent that  
6 adequate funding for its implementation, as determined by the  
7 University of California, is appropriated to the University of  
8 California in the annual Budget Act or another statute.

9 SEC. 5. Section 102247 of the Health and Safety Code is  
10 amended to read:

11 102247. (a) There is hereby created in the State Treasury the  
12 Health Statistics Special Fund. The fund shall consist of revenues,  
13 including, but not limited to, all of the following:

14 (1) Fees or charges remitted to the State Registrar for record  
15 search or issuance of certificates, permits, registrations, or other  
16 documents pursuant to Chapter 3 (commencing with Section  
17 26801) of Part 3 of Division 2 of Title 3 of the Government Code,  
18 and Chapter 4 (commencing with Section 102525), Chapter 5  
19 (commencing with Section 102625), Chapter 8 (commencing with  
20 Section 103050), and Chapter 15 (commencing with Section  
21 103600) of Part 1 of Division 102.

22 (2) Funds remitted to the State Registrar by the federal Social  
23 Security Administration for participation in the enumeration at  
24 birth program.

25 (3) Funds remitted to the State Registrar by the National Center  
26 for Health Statistics pursuant to the federal Vital Statistics  
27 Cooperative Program.

28 (4) Any other funds collected by the State Registrar, except  
29 Children's Trust Fund fees collected pursuant to Section 18966 of  
30 the Welfare and Institutions Code, Umbilical Cord Blood  
31 Collection Program Fund fees collected pursuant to Section 1628,  
32 fees allocated to the Judicial Council pursuant to Section 1852 of  
33 the Family Code, and fees collected pursuant to Section 103645,  
34 all of which shall be deposited into the General Fund.

35 (b) Moneys in the Health Statistics Special Fund shall be  
36 expended by the State Registrar for the purpose of funding its  
37 existing programs and programs that may become necessary to  
38 carry out its mission, upon appropriation by the Legislature.

39 (c) Health Statistics Special Fund moneys shall be expended  
40 only for the purposes set forth in this section and Section 102249,

1 and shall not be expended for any other purpose or for any other  
2 state program.

3 (d) It is the intent of the Legislature that the Health Statistics  
4 Special Fund provide for the following:

5 (1) Registration and preservation of vital event records and  
6 dissemination of vital event information to the public.

7 (2) Data analysis of vital statistics for population projections,  
8 health trends and patterns, epidemiologic research, and  
9 development of information to support new health policies.

10 (3) Development of uniform health data systems that are  
11 integrated, accessible, and useful in the collection of information  
12 on health status.

13 (e) This section shall remain in effect only until January 1, ~~2020~~  
14 2022, and as of that date is repealed, unless a later enacted statute,  
15 that is enacted before January 1, ~~2020~~ 2022, deletes or extends  
16 that date.

17 SEC. 6. Section 102247 is added to the Health and Safety Code,  
18 to read:

19 102247. (a) There is hereby created in the State Treasury the  
20 Health Statistics Special Fund. The fund shall consist of revenues,  
21 including, but not limited to, all of the following:

22 (1) Fees or charges remitted to the State Registrar for record  
23 search or issuance of certificates, permits, registrations, or other  
24 documents pursuant to Chapter 3 (commencing with Section  
25 26801) of Part 3 of Division 2 of Title 3 of the Government Code,  
26 and Chapter 4 (commencing with Section 102525), Chapter 5  
27 (commencing with Section 102625), Chapter 8 (commencing with  
28 Section 103050), and Chapter 15 (commencing with Section  
29 103600) of Part 1 of Division 102.

30 (2) Funds remitted to the State Registrar by the federal Social  
31 Security Administration for participation in the enumeration at  
32 birth program.

33 (3) Funds remitted to the State Registrar by the National Center  
34 for Health Statistics pursuant to the federal Vital Statistics  
35 Cooperative Program.

36 (4) Any other funds collected by the State Registrar, except  
37 Children's Trust Fund fees collected pursuant to Section 18966 of  
38 the Welfare and Institutions Code, fees allocated to the Judicial  
39 Council pursuant to Section 1852 of the Family Code, and fees

1 collected pursuant to Section 103645, all of which shall be  
2 deposited into the General Fund.

3 (b) Moneys in the Health Statistics Special Fund shall be  
4 expended by the State Registrar for the purpose of funding its  
5 existing programs and programs that may become necessary to  
6 carry out its mission, upon appropriation by the Legislature.

7 (c) Health Statistics Special Fund moneys shall be expended  
8 only for the purposes set forth in this section and Section 102249,  
9 and shall not be expended for any other purpose or for any other  
10 state program.

11 (d) It is the intent of the Legislature that the Health Statistics  
12 Special Fund provide for the following:

13 (1) Registration and preservation of vital event records and  
14 dissemination of vital event information to the public.

15 (2) Data analysis of vital statistics for population projections,  
16 health trends and patterns, epidemiologic research, and  
17 development of information to support new health policies.

18 (3) Development of uniform health data systems that are  
19 integrated, accessible, and useful in the collection of information  
20 on health status.

21 (e) This section shall become operative on January 1, ~~2020~~  
22 2022.

23 SEC. 7. Section 103605 of the Health and Safety Code is  
24 amended to read:

25 103605. (a) The money collected by the State Registrar shall  
26 be deposited with the Treasurer for credit to the Health Statistics  
27 Special Fund, except for the Children's Trust Fund fees collected  
28 pursuant to Section 18966 of the Welfare and Institutions Code,  
29 the Umbilical Cord Blood Collection Program Fund fees collected  
30 pursuant to Section 1628, the fees allocated to the Judicial Council  
31 pursuant to Section 1852 of the Family Code, and the fees collected  
32 pursuant to Section 103645, all of which shall be deposited in the  
33 General Fund.

34 (b) This section shall remain in effect only until January 1, ~~2020~~  
35 2022, and as of that date is repealed, unless a later enacted statute,  
36 that is enacted before January 1, ~~2020~~ 2022, deletes or extends  
37 that date.

38 SEC. 8. Section 103605 is added to the Health and Safety Code,  
39 to read:

1 103605. (a) The money collected by the State Registrar shall  
2 be deposited with the Treasurer for credit to the Health Statistics  
3 Special Fund, except for the Children's Trust Fund fees collected  
4 pursuant to Section 18966 of the Welfare and Institutions Code,  
5 the fees allocated to the Judicial Council pursuant to Section 1852  
6 of the Family Code, and the fees collected pursuant to Section  
7 103645, all of which shall be deposited in the General Fund.

8 (b) This section shall become operative on January 1, ~~2020~~  
9 2022.

10 SEC. 9. Section 103625 of the Health and Safety Code is  
11 amended to read:

12 103625. (a) A fee of three dollars (\$3) shall be paid by the  
13 applicant for a certified copy of a fetal death or death record.

14 (b) (1) A fee of three dollars (\$3) shall be paid by a public  
15 agency or licensed private adoption agency applicant for a certified  
16 copy of a birth certificate that the agency is required to obtain in  
17 the ordinary course of business. A fee of nine dollars (\$9) shall be  
18 paid by any other applicant for a certified copy of a birth certificate.  
19 Four dollars (\$4) of any nine-dollar (\$9) fee is exempt from  
20 subdivision (e) and shall be paid either to a county children's trust  
21 fund or to the State Children's Trust Fund, in conformity with  
22 Article 5 (commencing with Section 18965) of Chapter 11 of Part  
23 6 of Division 9 of the Welfare and Institutions Code. Two dollars  
24 (\$2) of any nine-dollar (\$9) fee is exempt from subdivision (e) and  
25 shall be paid to the Umbilical Cord Blood Collection Program  
26 Fund in conformity with Section 1628.

27 (2) The board of supervisors of any county that has established  
28 a county children's trust fund may increase the fee for a certified  
29 copy of a birth certificate by up to three dollars (\$3) for deposit in  
30 the county children's trust fund in conformity with Article 5  
31 (commencing with Section 18965) of Chapter 11 of Part 6 of  
32 Division 9 of the Welfare and Institutions Code.

33 (c) A fee of three dollars (\$3) shall be paid by a public agency  
34 applicant for a certified copy of a marriage record, that has been  
35 filed with the county recorder or county clerk, that the agency is  
36 required to obtain in the ordinary course of business. A fee of six  
37 dollars (\$6) shall be paid by any other applicant for a certified  
38 copy of a marriage record that has been filed with the county  
39 recorder or county clerk. Three dollars (\$3) of any six-dollar (\$6)  
40 fee is exempt from subdivision (e) and shall be transmitted monthly

1 by each local registrar, county recorder, and county clerk to the  
2 state for deposit into the General Fund as provided by Section  
3 1852 of the Family Code.

4 (d) A fee of three dollars (\$3) shall be paid by a public agency  
5 applicant for a certified copy of a marriage dissolution record  
6 obtained from the State Registrar that the agency is required to  
7 obtain in the ordinary course of business. A fee of six dollars (\$6)  
8 shall be paid by any other applicant for a certified copy of a  
9 marriage dissolution record obtained from the State Registrar.

10 (e) Each local registrar, county recorder, or county clerk  
11 collecting a fee pursuant to subdivisions (a) to (d), inclusive, shall  
12 transmit 15 percent of the fee for each certified copy to the State  
13 Registrar by the 10th day of the month following the month in  
14 which the fee was received.

15 (f) In addition to the fees prescribed pursuant to subdivisions  
16 (a) to (d), inclusive, all applicants for certified copies of the records  
17 described in those subdivisions shall pay an additional fee of three  
18 dollars (\$3), that shall be collected by the State Registrar, the local  
19 registrar, county recorder, or county clerk, as the case may be.

20 (g) The local public official charged with the collection of the  
21 additional fee established pursuant to subdivision (f) may create  
22 a local vital and health statistics trust fund. The fees collected by  
23 local public officials pursuant to subdivision (f) shall be distributed  
24 as follows:

25 (1) Forty-five percent of the fee collected pursuant to subdivision  
26 (f) shall be transmitted to the State Registrar.

27 (2) The remainder of the fee collected pursuant to subdivision  
28 (f) shall be deposited into the collecting agency's vital and health  
29 statistics trust fund, except that in any jurisdiction in which a local  
30 vital and health statistics trust fund has not been established, the  
31 entire amount of the fee collected pursuant to subdivision (f) shall  
32 be transmitted to the State Registrar.

33 (3) Moneys transmitted to the State Registrar pursuant to this  
34 subdivision shall be deposited in accordance with Section 102247.

35 (h) Moneys in each local vital and health statistics trust fund  
36 shall be available to the local official charged with the collection  
37 of fees pursuant to subdivision (f) for the applicable jurisdiction  
38 for the purpose of defraying the administrative costs of collecting  
39 and reporting with respect to those fees and for other costs as  
40 follows:

1 (1) Modernization of vital record operations, including  
2 improvement, automation, and technical support of vital record  
3 systems.

4 (2) Improvement in the collection and analysis of health-related  
5 birth and death certificate information, and other community health  
6 data collection and analysis, as appropriate.

7 (i) Funds collected pursuant to subdivision (f) shall not be used  
8 to supplant funding in existence on January 1, 2002, that is  
9 necessary for the daily operation of vital record systems. It is the  
10 intent of the Legislature that funds collected pursuant to subdivision  
11 (f) be used to enhance service to the public, to improve analytical  
12 capabilities of state and local health authorities in addressing the  
13 health needs of newborn children and maternal health problems,  
14 and to analyze the health status of the general population.

15 (j) Each county shall annually submit a report to the State  
16 Registrar by March 1 containing information on the amount of  
17 revenues collected pursuant to subdivision (f) in the previous  
18 calendar year and on how the revenues were expended and for  
19 what purpose.

20 (k) Each local registrar, county recorder, or county clerk  
21 collecting the fee pursuant to subdivision (f) shall transmit 45  
22 percent of the fee for each certified copy to which subdivision (f)  
23 applies to the State Registrar by the 10th day of the month  
24 following the month in which the fee was received.

25 (l) The additional three dollars (\$3) authorized to be charged to  
26 applicants other than public agency applicants for certified copies  
27 of marriage records by subdivision (c) may be increased pursuant  
28 to Section 114.

29 (m) In providing for the expiration of the surcharge on birth  
30 certificate fees on June 30, 1999, the Legislature intends that  
31 juvenile dependency mediation programs pursue ancillary funding  
32 sources after that date.

33 (n) This section shall remain in effect only until January 1, ~~2020~~  
34 2022, and as of that date is repealed, unless a later enacted statute,  
35 that is enacted before January 1, ~~2020~~ 2022, deletes or extends  
36 that date.

37 SEC. 10. Section 103625 is added to the Health and Safety  
38 Code, to read:

39 103625. (a) A fee of three dollars (\$3) shall be paid by the  
40 applicant for a certified copy of a fetal death or death record.

1 (b) (1) A fee of three dollars (\$3) shall be paid by a public  
2 agency or licensed private adoption agency applicant for a certified  
3 copy of a birth certificate that the agency is required to obtain in  
4 the ordinary course of business. A fee of seven dollars (\$7) shall  
5 be paid by any other applicant for a certified copy of a birth  
6 certificate. Four dollars (\$4) of any seven-dollar (\$7) fee is exempt  
7 from subdivision (e) and shall be paid either to a county children's  
8 trust fund or to the State Children's Trust Fund, in conformity with  
9 Article 5 (commencing with Section 18965) of Chapter 11 of Part  
10 6 of Division 9 of the Welfare and Institutions Code.

11 (2) The board of supervisors of any county that has established  
12 a county children's trust fund may increase the fee for a certified  
13 copy of a birth certificate by up to three dollars (\$3) for deposit in  
14 the county children's trust fund in conformity with Article 5  
15 (commencing with Section 18965) of Chapter 11 of Part 6 of  
16 Division 9 of the Welfare and Institutions Code.

17 (c) A fee of three dollars (\$3) shall be paid by a public agency  
18 applicant for a certified copy of a marriage record, that has been  
19 filed with the county recorder or county clerk, that the agency is  
20 required to obtain in the ordinary course of business. A fee of six  
21 dollars (\$6) shall be paid by any other applicant for a certified  
22 copy of a marriage record that has been filed with the county  
23 recorder or county clerk. Three dollars (\$3) of any six-dollar (\$6)  
24 fee is exempt from subdivision (e) and shall be transmitted monthly  
25 by each local registrar, county recorder, and county clerk to the  
26 state for deposit into the General Fund as provided by Section  
27 1852 of the Family Code.

28 (d) A fee of three dollars (\$3) shall be paid by a public agency  
29 applicant for a certified copy of a marriage dissolution record  
30 obtained from the State Registrar that the agency is required to  
31 obtain in the ordinary course of business. A fee of six dollars (\$6)  
32 shall be paid by any other applicant for a certified copy of a  
33 marriage dissolution record obtained from the State Registrar.

34 (e) Each local registrar, county recorder, or county clerk  
35 collecting a fee pursuant to subdivisions (a) to (d), inclusive, shall  
36 transmit 15 percent of the fee for each certified copy to the State  
37 Registrar by the 10th day of the month following the month in  
38 which the fee was received.

39 (f) In addition to the fees prescribed pursuant to subdivisions  
40 (a) to (d), inclusive, all applicants for certified copies of the records

1 described in those subdivisions shall pay an additional fee of three  
2 dollars (\$3), that shall be collected by the State Registrar, the local  
3 registrar, county recorder, or county clerk, as the case may be.

4 (g) The local public official charged with the collection of the  
5 additional fee established pursuant to subdivision (f) may create  
6 a local vital and health statistics trust fund. The fees collected by  
7 local public officials pursuant to subdivision (f) shall be distributed  
8 as follows:

9 (1) Forty-five percent of the fee collected pursuant to subdivision  
10 (f) shall be transmitted to the State Registrar.

11 (2) The remainder of the fee collected pursuant to subdivision  
12 (f) shall be deposited into the collecting agency's vital and health  
13 statistics trust fund, except that in any jurisdiction in which a local  
14 vital and health statistics trust fund has not been established, the  
15 entire amount of the fee collected pursuant to subdivision (f) shall  
16 be transmitted to the State Registrar.

17 (3) Moneys transmitted to the State Registrar pursuant to this  
18 subdivision shall be deposited in accordance with Section 102247.

19 (h) Moneys in each local vital and health statistics trust fund  
20 shall be available to the local official charged with the collection  
21 of fees pursuant to subdivision (f) for the applicable jurisdiction  
22 for the purpose of defraying the administrative costs of collecting  
23 and reporting with respect to those fees and for other costs as  
24 follows:

25 (1) Modernization of vital record operations, including  
26 improvement, automation, and technical support of vital record  
27 systems.

28 (2) Improvement in the collection and analysis of health-related  
29 birth and death certificate information, and other community health  
30 data collection and analysis, as appropriate.

31 (i) Funds collected pursuant to subdivision (f) shall not be used  
32 to supplant funding in existence on January 1, 2002, that is  
33 necessary for the daily operation of vital record systems. It is the  
34 intent of the Legislature that funds collected pursuant to subdivision  
35 (f) be used to enhance service to the public, to improve analytical  
36 capabilities of state and local health authorities in addressing the  
37 health needs of newborn children and maternal health problems,  
38 and to analyze the health status of the general population.

39 (j) Each county shall annually submit a report to the State  
40 Registrar by March 1 containing information on the amount of



1 revenues collected pursuant to subdivision (f) in the previous  
2 calendar year and on how the revenues were expended and for  
3 what purpose.

4 (k) Each local registrar, county recorder, or county clerk  
5 collecting the fee pursuant to subdivision (f) shall transmit 45  
6 percent of the fee for each certified copy to which subdivision (f)  
7 applies to the State Registrar by the 10th day of the month  
8 following the month in which the fee was received.

9 (l) The additional three dollars (\$3) authorized to be charged to  
10 applicants other than public agency applicants for certified copies  
11 of marriage records by subdivision (c) may be increased pursuant  
12 to Section 114.

13 (m) In providing for the expiration of the surcharge on birth  
14 certificate fees on June 30, 1999, the Legislature intends that  
15 juvenile dependency mediation programs pursue ancillary funding  
16 sources after that date.

17 (n) This section shall become operative on January 1, 2020  
18 2022.

19 SEC. 11. This act is an urgency statute necessary for the  
20 immediate preservation of the public peace, health, or safety within  
21 the meaning of Article IV of the Constitution and shall go into  
22 immediate effect. The facts constituting the necessity are:

23 In order to fund efforts aimed at curing disorders and diseases  
24 at the earliest possible time, it is necessary that this act take effect  
25 immediately.